

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:)

Maninderjit Kaur Atwal, M.D.)

Case No. 800-2015-012206

**Physician's and Surgeon's)
Certificate No. A 103499)**

**Respondent)
_____)**

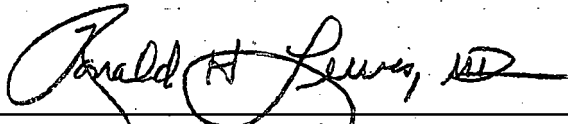
DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on November 30, 2018.

IT IS SO ORDERED: October 31, 2018.

MEDICAL BOARD OF CALIFORNIA



**Ronald H. Lewis, M.D., Chair
Panel A**

1 XAVIER BECERRA
Attorney General of California
2 ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General
3 JANNSEN TAN
Deputy Attorney General
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8 *Attorneys for Complainant*

9 **BEFORE THE**
10 **MEDICAL BOARD OF CALIFORNIA**
11 **DEPARTMENT OF CONSUMER AFFAIRS**
12 **STATE OF CALIFORNIA**

13 In the Matter of the Accusation Against:

Case No. 800-2015-012206

14 **MANINDERJIT KAUR ATWAL, M.D.**
15 **10305 Promenade Pkwy.,**
16 **Elk Grove, CA 95757**

OAH No. 2016120950

17 **Physician's and Surgeon's Certificate No.**
18 **No. A 103499**

19 **STIPULATED SETTLEMENT AND**
20 **DISCIPLINARY ORDER**

21 Respondent.

22 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
23 entitled proceedings that the following matters are true:

24 PARTIES

25 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board
26 of California (Board). She brought this action solely in her official capacity and is represented in
27 this matter by Xavier Becerra, Attorney General of the State of California, by Jannsen Tan,
28 Deputy Attorney General.

2. Respondent Maninderjit Kaur Atwal, M.D. (Respondent) is represented in this
proceeding by attorney John Quincy Brown, III, Esq., whose address is: 455 Capitol Mall, Ste
200 Sacramento, CA 95814.

1 3. On or about April 18, 2008, the Board issued Physician's and Surgeon's Certificate
2 No. A 103499 to Maninderjit Kaur Atwal, M.D. (Respondent). The Physician's and Surgeon's
3 Certificate No. A 103499 was in full force and effect at all times relevant to the charges brought
4 in Accusation No. 800-2015-012206, and will expire on October 31, 2019, unless renewed.

5 **JURISDICTION**

6 4. Accusation No. 800-2015-012206 was filed before the Board, and is currently
7 pending against Respondent. The Accusation and all other statutorily required documents were
8 properly served on Respondent on October 17, 2017. Respondent timely filed her Notice of
9 Defense contesting the Accusation.

10 5. A copy of Accusation No. 800-2015-012206 is attached as Exhibit A and
11 incorporated herein by reference.

12 **ADVISEMENT AND WAIVERS**

13 6. Respondent has carefully read, fully discussed with counsel, and understands the
14 charges and allegations in Accusation No. 800-2015-012206. Respondent has also carefully read,
15 fully discussed with counsel, and understands the effects of this Stipulated Settlement and
16 Disciplinary Order.

17 7. Respondent is fully aware of her legal rights in this matter, including the right to a
18 hearing on the charges and allegations in the Accusation; the right to confront and cross-examine
19 the witnesses against her; the right to present evidence and to testify on her own behalf; the right
20 to the issuance of subpoenas to compel the attendance of witnesses and the production of
21 documents; the right to reconsideration and court review of an adverse decision; and all other
22 rights accorded by the California Administrative Procedure Act and other applicable laws.

23 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and
24 every right set forth above.

25 **CULPABILITY**

26 9. Respondent understands and agrees that the charges and allegations in Accusation
27 No. 800-2015-012206, if proven at a hearing, constitute cause for imposing discipline upon her
28 Physician's and Surgeon's Certificate No. A 103499.

1 10. For the purpose of resolving the Accusation without the expense and uncertainty of
2 further proceedings, Respondent agrees that, at a hearing, Complainant could establish a factual
3 basis for the charges in the Accusation, and that Respondent hereby gives up her right to contest
4 those charges.

5 11. Respondent agrees that if she ever petitions for early termination or modification of
6 probation, or if an accusation and/or petition to revoke probation is filed against him, before the
7 Medical Board of California, all of the charges and allegations contained in Accusation No. 800-
8 2015-012206 shall be deemed true, correct and fully admitted by Respondent for purposes of that
9 proceeding or any other licensing proceeding involving Respondent in the State of California.

10 12. Respondent agrees that her Physician's and Surgeon's Certificate No. A 103499 is
11 subject to discipline and she agrees to be bound by the Board's probationary terms as set forth in
12 the Disciplinary Order below.

13 **RESERVATION**

14 13. The admissions made by Respondent herein are only for the purposes of this
15 proceeding, or any other proceedings in which the Medical Board of California or other
16 professional licensing agency is involved, and shall not be admissible in any other criminal or
17 civil proceeding.

18 14. The parties agree that this Stipulated Settlement and Disciplinary Order shall be
19 submitted to the Board for its consideration in the above-entitled matter and, further, that the
20 Board shall have a reasonable period of time in which to consider and act on this Stipulation after
21 receiving it. Respondent acknowledges that she shall not be permitted to withdraw from this
22 Stipulation unless it is rejected by the Board.

23 15. The parties agree that this Stipulated Settlement and Disciplinary Order shall be null
24 and void and not binding upon the parties unless approved and adopted by the Board, except for
25 this paragraph, which shall remain in full force and effect. Respondent fully understands and
26 agrees that in deciding whether or not to approve and adopt this Stipulation, the Board may
27 receive oral and written communications from its staff and/or the Attorney General's office.
28 Communications pursuant to this paragraph shall not disqualify the Board, any member thereof,

1 and/or any other person from future participation in this or any other matter affecting or involving
2 Respondent. In the event that the Board, in its discretion, does not approve and adopt this
3 Stipulation, with the exception of this paragraph, it shall not become effective, shall be of no
4 evidentiary value whatsoever, and shall not be relied upon or introduced in any disciplinary action
5 by either party hereto. Respondent further agrees that should the Board reject this Stipulation for
6 any reason, Respondent will assert no claim that the Board, or any member thereof, was
7 prejudiced by its/his/her review, discussion and/or consideration of this Stipulation or of any
8 matter or matters related hereto. Respondent acknowledges that the Board shall not be
9 disqualified from further action in this matter by virtue of its consideration of this matter.

10 **ADDITIONAL PROVISIONS**

11 16. This Stipulated Settlement and Disciplinary Order is intended by the parties herein to
12 be an integrated writing representing the complete, final and exclusive embodiment of the
13 agreements of the parties in the above-entitled matter.

14 17. The parties agree that facsimile copies of this Stipulated Settlement and Disciplinary
15 Order for Public Reprimand, including facsimile signatures of the parties, may be used in lieu of
16 original documents and signatures and, further, that facsimile copies and signatures shall have the
17 same force and effect as originals.

18 18. In consideration of the foregoing admissions and stipulations, the parties agree the
19 Board may, without further notice to or opportunity to be heard by Respondent, issue and enter
20 the following Disciplinary Order:

21 **DISCIPLINARY ORDER**

22 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 103499
23 issued to Respondent Maninderjit Kaur Atwal, M.D., is revoked. However, the revocation is
24 stayed and Respondent is placed on probation for 35 months on the following terms and
25 conditions.

26 1. **EDUCATION COURSE.** Within 60 calendar days of the effective date of this
27 Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee
28 for its prior approval educational program(s) or course(s) which shall not be less than 40 hours

1 per year, for each year of probation. The educational program(s) or course(s) shall be aimed at
2 correcting any areas of deficient practice or knowledge and shall be Category I certified. The
3 educational program(s) or course(s) shall be at Respondent's expense and shall be in addition to
4 the Continuing Medical Education (CME) requirements for renewal of licensure. Following the
5 completion of each course, the Board or its designee may administer an examination to test
6 Respondent's knowledge of the course. Respondent shall provide proof of attendance for 65
7 hours of CME of which 40 hours were in satisfaction of this condition.

8 2. MEDICAL RECORD KEEPING COURSE. Within 60 calendar days of the effective
9 date of this Decision, Respondent shall enroll in a course in medical record keeping approved in
10 advance by the Board or its designee. Respondent shall provide the approved course provider
11 with any information and documents that the approved course provider may deem pertinent.
12 Respondent shall participate in and successfully complete the classroom component of the course
13 not later than six (6) months after Respondent's initial enrollment. Respondent shall successfully
14 complete any other component of the course within one (1) year of enrollment. The medical
15 record keeping course shall be at Respondent's expense and shall be in addition to the Continuing
16 Medical Education (CME) requirements for renewal of licensure.

17 A medical record keeping course taken after the acts that gave rise to the charges in the
18 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
19 or its designee, be accepted towards the fulfillment of this condition if the course would have
20 been approved by the Board or its designee had the course been taken after the effective date of
21 this Decision.

22 Respondent shall submit a certification of successful completion to the Board or its
23 designee not later than 15 calendar days after successfully completing the course, or not later than
24 15 calendar days after the effective date of the Decision, whichever is later.

25 3. SOLO PRACTICE PROHIBITION. Respondent is prohibited from engaging in the
26 solo practice of medicine. Prohibited solo practice includes, but is not limited to, a practice
27 where: 1) Respondent merely shares office space with another physician but is not affiliated for
28 purposes of providing patient care, or 2) Respondent is the sole physician practitioner at that

1 location.

2 If Respondent fails to establish a practice with another physician or secure employment in
3 an appropriate practice setting within 60 calendar days of the effective date of this Decision,
4 Respondent shall receive a notification from the Board or its designee to cease the practice of
5 medicine within three (3) calendar days after being so notified. The Respondent shall not resume
6 practice until an appropriate practice setting is established.

7 If, during the course of the probation, the Respondent's practice setting changes and the
8 Respondent is no longer practicing in a setting in compliance with this Decision, the Respondent
9 shall notify the Board or its designee within five (5) calendar days of the practice setting change.

10 If Respondent fails to establish a practice with another physician or secure employment in an
11 appropriate practice setting within 60 calendar days of the practice setting change, Respondent
12 shall receive a notification from the Board or its designee to cease the practice of medicine within
13 three (3) calendar days after being so notified. The Respondent shall not resume practice until an
14 appropriate practice setting is established.

15 4. PROHIBITED PRACTICE. During probation, Respondent is prohibited from
16 practicing labor and delivery. After the effective date of this Decision, all patients being treated
17 by the Respondent shall be notified that the Respondent is prohibited from practicing labor and
18 delivery. Any new patients must be provided this notification at the time of their initial
19 appointment.

20 Respondent shall maintain a log of all patients to whom the required oral notification was
21 made. The log shall contain the: 1) patient's name, address and phone number; 2) patient's
22 medical record number, if available; 3) the full name of the person making the notification; 4) the
23 date the notification was made; and 5) a description of the notification given. Respondent shall
24 keep this log in a separate file or ledger, in chronological order, shall make the log available for
25 immediate inspection and copying on the premises at all times during business hours by the Board
26 or its designee, and shall retain the log for the entire term of probation.

27 5. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the
28 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the

1 Chief Executive Officer at every hospital where privileges or membership are extended to
2 Respondent, at any other facility where Respondent engages in the practice of medicine,
3 including all physician and locum tenens registries or other similar agencies, and to the Chief
4 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
5 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15
6 calendar days.

7 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

8 6. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE
9 NURSES. During probation, Respondent is prohibited from supervising physician assistants and
10 advanced practice nurses.

11 7. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules
12 governing the practice of medicine in California and remain in full compliance with any court
13 ordered criminal probation, payments, and other orders.

14 8. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations
15 under penalty of perjury on forms provided by the Board, stating whether there has been
16 compliance with all the conditions of probation.

17 Respondent shall submit quarterly declarations not later than 10 calendar days after the end
18 of the preceding quarter.

19 9. GENERAL PROBATION REQUIREMENTS.

20 Compliance with Probation Unit

21 Respondent shall comply with the Board's probation unit.

22 Address Changes

23 Respondent shall, at all times, keep the Board informed of Respondent's business and
24 residence addresses, email address (if available), and telephone number. Changes of such
25 addresses shall be immediately communicated in writing to the Board or its designee. Under no
26 circumstances shall a post office box serve as an address of record, except as allowed by Business
27 and Professions Code section 2021(b).

28 Place of Practice

1 Respondent shall not engage in the practice of medicine in Respondent's or patient's place
2 of residence, unless the patient resides in a skilled nursing facility or other similar licensed
3 facility.

4 License Renewal

5 Respondent shall maintain a current and renewed California physician's and surgeon's
6 license.

7 Travel or Residence Outside California

8 Respondent shall immediately inform the Board or its designee, in writing, of travel to any
9 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty
10 (30) calendar days.

11 In the event Respondent should leave the State of California to reside or to practice,
12 Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of
13 departure and return.

14 10. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be
15 available in person upon request for interviews either at Respondent's place of business or at the
16 probation unit office, with or without prior notice throughout the term of probation.

17 11. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
18 its designee in writing within 15 calendar days of any periods of non-practice lasting more than
19 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
20 defined as any period of time Respondent is not practicing medicine as defined in Business and
21 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
22 patient care, clinical activity or teaching, or other activity as approved by the Board. If
23 Respondent resides in California and is considered to be in non-practice, Respondent shall
24 comply with all terms and conditions of probation. All time spent in an intensive training
25 program which has been approved by the Board or its designee shall not be considered non-
26 practice and does not relieve Respondent from complying with all the terms and conditions of
27 probation. Practicing medicine in another state of the United States or Federal jurisdiction while
28 on probation with the medical licensing authority of that state or jurisdiction shall not be

1 considered non-practice. A Board-ordered suspension of practice shall not be considered as a
2 period of non-practice.

3 In the event Respondent's period of non-practice while on probation exceeds 18 calendar
4 months, Respondent shall successfully complete the Federation of State Medical Boards's Special
5 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program
6 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model
7 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

8 Respondent's period of non-practice while on probation shall not exceed two (2) years.

9 Periods of non-practice will not apply to the reduction of the probationary term.

10 Periods of non-practice for a Respondent residing outside of California will relieve
11 Respondent of the responsibility to comply with the probationary terms and conditions with the
12 exception of this condition and the following terms and conditions of probation: Obey All Laws;
13 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or
14 Controlled Substances; and Biological Fluid Testing.

15 12. COMPLETION OF PROBATION. Respondent shall comply with all financial
16 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
17 completion of probation. Upon successful completion of probation, Respondent's certificate shall
18 be fully restored.

19 13. VIOLATION OF PROBATION. Failure to fully comply with any term or condition
20 of probation is a violation of probation. If Respondent violates probation in any respect, the
21 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and
22 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,
23 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have
24 continuing jurisdiction until the matter is final, and the period of probation shall be extended until
25 the matter is final.

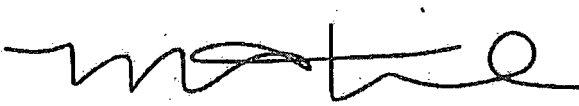
26 14. LICENSE SURRENDER. Following the effective date of this Decision, if
27 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
28 the terms and conditions of probation, Respondent may request to surrender his or her license.

1 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
2 determining whether or not to grant the request, or to take any other action deemed appropriate
3 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
4 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
5 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
6 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
7 application shall be treated as a petition for reinstatement of a revoked certificate.


8 15. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
9 with probation monitoring each and every year of probation, as designated by the Board, which
10 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
11 California and delivered to the Board or its designee no later than January 31 of each calendar
12 year.

13 ACCEPTANCE

14 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
15 discussed it with my attorney, John Quincy Brown III. I understand the stipulation and the effect
16 it will have on my Physician's and Surgeon's Certificate No. A 103499. I enter into this
17 Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree
18 to be bound by the Decision and Order of the Medical Board of California.

19
20 DATED: 8/16/18 
21 MANINDERJIT KAUR ATWAL, M.D.
Respondent

22 I have read and fully discussed with Respondent Maninderjit Kaur Atwal, M.D. the terms
23 and conditions and other matters contained in the above Stipulated Settlement and Disciplinary
24 Order. I approve its form and content.

25 DATED: 8/16/18 
26 JOHN QUINCY BROWN III
Attorney for Respondent

27 ///

28 ///

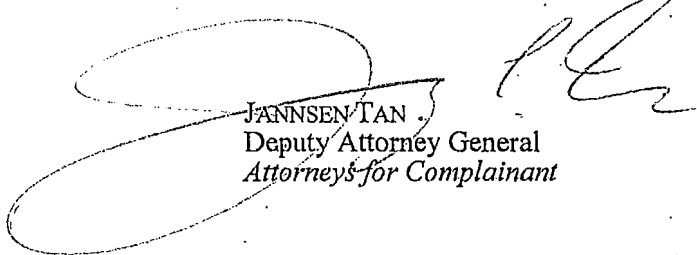
ENDORSEMENT

The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully submitted for consideration by the Medical Board of California.

Dated: 8/17/2018

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General


JANNSEN TAN
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 800-2015-012206

1 XAVIER BECERRA
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8 *Attorneys for Complainant*

FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO October 17 2017
BY: R. Voong ANALYST

10 **BEFORE THE**
11 **MEDICAL BOARD OF CALIFORNIA**
12 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

13 In the Matter of the Accusation Against:

Case No. 800-2015-012206

14 **Maninderjit Kaur Atwal, M.D.**
Kaiser Permanente
15 Department of Obstetrics/Gynecology
10305 Promenade Pkwy
16 Elk Grove, CA 95757-9400

A C C U S A T I O N

17 **Physician's and Surgeon's Certificate No.**
18 **No. A 103499,**

Respondent.

19
20 Complainant alleges:

21 **PARTIES**

22 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
23 capacity as the Executive Director of the Medical Board of California, Department of Consumer
24 Affairs (Board).

25 2. On or about April 18, 2008, the Medical Board issued Physician's and Surgeon's
26 Certificate No. A 103499 to Maninderjit Kaur Atwal, M.D. (Respondent). The Physician's and
27 Surgeon's Certificate No. A 103499 was in full force and effect at all times relevant to the
28 charges brought herein and will expire on October 31, 2019, unless renewed.

JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 2227 of the Code states:

“(a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provisions of this chapter:

“(1) Have his or her license revoked upon order of the board.

“(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.

“(3) Be placed on probation and be required to pay the costs of probation monitoring upon order of the board.

“(4) Be publicly reprimanded by the board. The public reprimand may include a requirement that the licensee complete relevant educational courses approved by the board.

“(5) Have any other action taken in relation to discipline as part of an order of probation, as the board or an administrative law judge may deem proper.

“(b) Any matter heard pursuant to subdivision (a), except for warning letters, medical review or advisory conferences, professional competency examinations, continuing education activities, and cost reimbursement associated therewith that are agreed to with the board and successfully completed by the licensee, or other matters made confidential or privileged by existing law, is deemed public, and shall be made available to the public by the board pursuant to Section 803.1.”

5. Section 2234 of the Code, states:

“The board shall take action against any licensee who is charged with unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:

1 “(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the
2 violation of, or conspiring to violate any provision of this chapter.

3 “(b) Gross negligence.

4 “(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or
5 omissions. An initial negligent act or omission followed by a separate and distinct departure from
6 the applicable standard of care shall constitute repeated negligent acts.

7 “(1) An initial negligent diagnosis followed by an act or omission medically appropriate
8 for that negligent diagnosis of the patient shall constitute a single negligent act.

9 “(2) When the standard of care requires a change in the diagnosis, act, or omission that
10 constitutes the negligent act described in paragraph (1), including, but not limited to, a
11 reevaluation of the diagnosis or a change in treatment, and the licensee’s conduct departs from the
12 applicable standard of care, each departure constitutes a separate and distinct breach of the
13 standard of care.

14 “(d) Incompetence.

15 “(e) The commission of any act involving dishonesty or corruption which is substantially
16 related to the qualifications, functions, or duties of a physician and surgeon.

17 “(f) Any action or conduct which would have warranted the denial of a certificate.

18 “(g) The practice of medicine from this state into another state or country without meeting
19 the legal requirements of that state or country for the practice of medicine. Section 2314 shall not
20 apply to this subdivision. This subdivision shall become operative upon the implementation of the
21 proposed registration program described in Section 2052.5.

22 “(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and
23 participate in an interview by the board. This subdivision shall only apply to a certificate holder
24 who is the subject of an investigation by the board.”

25 6. Section 2266 of the Code states: “The failure of a physician and surgeon to maintain
26 adequate and accurate records relating to the provision of services to their patients constitutes
27 unprofessional conduct.”

28 ///

FIRST CAUSE FOR DISCIPLINE
(Gross Negligence)

7. Respondent is subject to disciplinary action under sections 2227 and 2234, as defined by section 2234, subdivision (b), of the code, in that she committed gross negligence in her care and treatment of Patient A, as more particularly alleged hereinafter.

8. Respondent is a physician and surgeon board certified in Obstetrics and Gynecology (OB-GYN), who at all times alleged herein practiced medicine at the Fremont Medical Center in Yuba City, CA.

9. On or about December 5, 2011, at approximately 1630 hrs., Respondent saw Patient A. Patient A was 23-year-old Gravida 1 Para 0, with an estimated date of delivery of January 1, 2012. Patient A was admitted at the Fremont Medical Center, Yuba City at 36 weeks in labor, following spontaneous onset of labor, noted to be 4 cm dilated, 100% effaced with intact membranes at minus 2 station.

10. At approximately 1900 hrs., nursing notes revealed that the fetal heart rate tracing became a Category 2 tracing with some early and variable deceleration. Nursing notes revealed that Patient A asked for an epidural at or around 2040 hrs. At this time, the fetal tracing was noted to have moderate variability and variable decelerations.

11. The epidural was placed at approximately 2059 hrs. Immediately after the epidural, Patient A became hypotensive and the fetal heart rate tracing showed fetal bradycardia. Patient A was given ephedrine to improve her blood pressure. At or about 2130 hrs, the fetal heart rate returned to a normal rate, but with diminished variability and late decelerations. The fetal monitoring strip revealed that there was a prolonged deceleration from 2118 hrs. to 2126 hrs.; decreased heart beat to beat variability from 2128 hrs to 2135 hrs.; and late and variable decelerations that persisted until 2300 hrs. They recurred again at 2314 hrs with a change in baseline fetal hear tones from the 140s to the 160s.

12. At 2330 hrs, the nursing notes documented a Category 2 tracing with moderate variability and early, late, and variable decelerations. Respondent was notified at 2339 hrs of the events that had transpired since the epidural placement. The notes state that Respondent wanted to be called if the late decelerations were repetitive.

1 13. On or about December 6, 2011, at approximately 0030 hrs., Respondent called to
2 check on patient's condition. Nursing notes revealed that Respondent was told that the fetal
3 tracing was Category 2 with occasional late decels that were unresponsive to interventions.
4 Respondent did not give any new orders.

5 14. At approximately 0129 hrs., nursing notes documented the following: "TC to Dr.
6 Atwal, informed of pt progress, with repetitive possible lates, prolonged decels with test pushing,
7 hard to monitor uc's due to pt position, MD asked to come and evaluate pt and review strip, MD
8 states 'OK' that she will come to hospital now."

9 15. Respondent saw Patient A at approximately 0142 hrs., and determined that the vertex
10 was *occiput anterior position*. Respondent decided to do a vacuum assisted vaginal delivery.
11 According to the nursing notes (documented in real time during the delivery), Respondent applied
12 a Kiwi vacuum 5 times from 0145 hrs. to 0155 hrs. Two different Kiwi vacuums were used due
13 to blood collection in the cup and pop-offs. During the fourth attempt, Respondent discussed
14 with Patient A, the possible need for a C-section if she cannot move the baby down with pushing.
15 Patient A stated that "she can do it."

16 16. At approximately 0155 hrs., nursing notes documented that the fetal heart rate was
17 indeterminate. Respondent noted that the fetal heart rate tracing was a Category 2 tracing.
18 Respondent switched to a Bell vacuum and attempted 2 pulls, but had difficulty maintaining
19 suction. The nursing notes documented that Respondent then switched back to a Kiwi vacuum
20 and attempted 6 more pulls, 4 of which popped off, between 0205 hrs. and 0211 hrs.

21 17. The baby delivered over an episiotomy in an *occiput posterior position*. The infant
22 had no respiratory effort or heart rate and required CPR. The infant had Apgar's of 0,2,2,2,2. The
23 infant required intubation, fluids, septic work-up, and had an enlarging hematoma on the scalp,
24 which resulted in the infant's hemoglobin dropping from 13.5 to 8.4 and required a blood
25 transfusion. The baby was transferred to Sutter Memorial NICU with whole body cooling due to
26 concerns for neurologic injury as he had dilated pupils and poor muscle tone.

27 18. Respondent committed gross negligence in her care and treatment of Patient A which
28 included, but was not limited to the following:

1 A. Respondent failed to recognize and/or act on the fetal heart rate tracing, which was
2 not responding to resuscitative methods.

3 B. Respondent failed to recognize that the fetus was at risk for hypoxic ischemic injury
4 and act accordingly.

5 C. Respondent failed to expedite delivery sooner in order to improve the infant's
6 outcome.

7 D. Respondent excessively used and/or misused the vacuum extractor device(s).

8 **SECOND CAUSE FOR DISCIPLINE**
9 **(Repeated Negligent Acts)**

10 19. Respondent is further subject to disciplinary action under sections 2227 and 2234, as
11 defined by section 2234, subdivision (c), of the Code, in that she committed repeated negligent
12 acts in her care and treatment of Patient A, as more particularly alleged hereinafter: Paragraphs 7
13 through 18, above, are hereby incorporated by reference and realleged as if fully set forth herein.

14 **THIRD CAUSE FOR DISCIPLINE**
15 **(Failure to Maintain Adequate and Accurate Medical Records)**

16 20. Respondent is further subject to discipline under sections 2227 and 2334, as defined
17 by section 2266, of the Code, in that she failed to maintain adequate and accurate medical records
18 in the care and treatment of Patient A, as more particularly alleged hereinafter: Paragraphs 7
19 through 18, above, are hereby incorporated by reference and realleged as if fully set forth herein.

20 **PRAYER**

21 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
22 and that following the hearing, the Medical Board of California issue a decision:

23 1. Revoking or suspending Physician's and Surgeon's Certificate No. A 103499, issued
24 to respondent Maninderjit Kaur Atwal, M.D.;

25 2. Revoking, suspending or denying approval of respondent Maninderjit Kaur Atwal,
26 M.D.'s authority to supervise physician assistants and advanced practice nurses;

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28 ///

1 3. Ordering respondent Maninderjit Kaur Atwal, M.D., if placed on probation, to pay
2 the Board the costs of probation monitoring; and

3 4. Taking such other and further action as deemed necessary and proper.

4
5 DATED: October 17, 2017


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant